

Our position on saturated fats

Key message

Public health can be significantly improved by replacing saturated fats with unsaturated fats in our diets.

Background

Fats are an essential part of a healthy and well-balanced diet. Together with carbohydrates and proteins, they provide most of the energy in our diet.

Many different dietary fats and oils are used in the food industry to create a wide variety of tastes and textures. Over 90% of these dietary fats are in the form of triglycerides – compounds linked to fatty acids. These fatty acids may be either saturated fatty acids (SFAs) or unsaturated fatty acids (UFAs). SFAs are typically of animal origin and solid at room temperature (such as butter and lard), while UFAs are usually liquid at room temperature, examples being fish oils and the majority of vegetable oils. Food products may contain varying proportions of SFAs and UFAs.

Fats high in SFAs increase the level of low-density lipoprotein cholesterol (LDL-cholesterol) in the blood. LDL-cholesterol can increase the chances of cardiovascular disease, and because of this it is considered “bad” cholesterol. For this reason, based on the research from health authorities around the world, the World Health Organisation recommends limiting the intake of SFA to a maximum of 10% of total energy intake¹. In the majority of countries across the world, and especially in Western countries, current intakes of SFAs exceed this recommendation.^{2,3}

UFAs, by contrast, lower the level of “bad” LDL-cholesterol in the blood and reduce the risk of cardiovascular disease. Replacing SFAs with UFAs helps to maintain normal blood cholesterol levels^{4,5}, and recent studies confirmed that replacing SFAs with UFAs reduces the risk of developing coronary heart disease.^{6,7}

Our position

Vandemoortele supports the WHO recommendation to limit the intake of SFAs to a maximum of 10% of our energy intake. We also subscribe to the view that replacing SFAs with UFAs in our diets has a positive effect on human health.

Our products contain varying amounts of SFAs. Over recent decades, we have significantly reduced the content of SFAs in our products, especially in margarines and spreads. These positive results have been achieved both by lowering the overall fat content and by replacing SFAs with UFAs. The development of semi-liquid margarines is an excellent example of our progress in this area.

Furthermore, in 2013, we founded the Vandemoortele Centre for Lipid Science and Technology at the University of Ghent. The purpose of the Centre is to improve the health value of fats by gaining new scientific insights and developing technological innovations.

We are committed to continuously optimising the SFA content of our products, while also preserving their excellent quality and taste.

¹ FAO/WHO (2010) Fats and fatty acids in human nutrition. Report of an expert consultation. Rome, Italy.

² Harika RK, Eilander A, Alsema M, Osendarp SJ, Zock PL. Global, regional, and national consumption levels of dietary fats and oils in 1990 and 2010: a systematic analysis including 266 country-specific nutrition surveys. *Ann Nutr Metab.* 2013;63(3):229-38. doi: 10.1159/000355437. Epub 2013 Oct 29. Review. PMID: 24192557.

³ Micha R, Khatibzadeh S, Shi P, Fahimi S, Lim S, Andrews KG, Engell RE, Powles J, Ezzati M, Mozaffarian D; Global Burden of Diseases Nutrition and Chronic Diseases Expert Group NutriCoDE. Global, regional, and national consumption levels of dietary fats and oils in 1990 and 2010: a systematic analysis including 266 country-specific nutrition surveys. *BMJ.* 2014 Apr 15;348:g2272. doi: 10.1136/bmj.g2272. PMID:2473620.

⁴ EFSA Panel on Dietetic products, Nutrition and Energy (NDA), *EFSA Journal* 2011; 9(4): 2069, January 2011.

⁵ EFSA opinion of the scientific panel on dietetic products, nutrition and allergies on a request from the Commission related to the presence of trans fatty acids in foods and the effects on human health of the consumption of trans fatty acids (Request EFSA-Q-2003-022), adopted on 8 July 2004.

⁶ Li Y et al. (2015), Saturated Fats Compared With Unsaturated Fats and Sources of Carbohydrates in Relation to Risk of Coronary Heart Disease. A Prospective Cohort Study. *J Am Coll Cardiol.*; 66(14):1538-1548.

⁷ Zong G., Li Y, Wanders A. J. et al. ,(2016),Intakes of Individual Saturated Fatty Acids and Risk of Coronary Heart Disease in Two Large Prospective Cohort Studies of U.S. Men and Women. *BMJ* 2016;355:i5796